



**MINIATURE HORSE ASSOCIATION OF AUSTRALIA INC**

**APPLICATION FOR PERMANENT HEIGHT CARD**

ABN 22 921 298 546

ARBN 096 500 346

**PLEASE EMAIL COMPLETED FORM TO ... [admin@mhaa.com.au](mailto:admin@mhaa.com.au)**

**All Horses applying for Permanent Height Cards MUST be Adult Registered with MHAA® and owned by a current financial Member of MHAA®.**

**Name of Horse: .....**

**MHAA® Registration Number: .....**

**Owner of Horse: ..... **MHAA® Member No:**.....**

**Details of Horse: **Date of Birth:**..... **Sex** .....**

**Colour: ..... **Microchip No** .....**

**Brands: if not Microchipped: **Near Side** ..... **Off Side** .....**

**Details of Member appointed by MHAA® to measure the above Horse for the Permanent Height Card:**

**Name of Member: ..... **MHAA® Member No:**.....**

**Measurer's declaration: I declare that I have identified and measured the above Permanent Registered MHAA® Horse, in accordance with MHAA® guidelines, for a Permanent Height Card.**

**Measurement:** .....

**Date of Measurement:** .....

**Measured by** .....

**Signature:** .....

Please Print Name.

**Measured in the presence of:**

**Owner of Horse: ..... **Signature** ..... **Date:** .....**

Please Print Name.

By signing this Application I/we agree that if this application is accepted and approved, I/we will abide by all the terms and regulations set forth in the Constitution and General Rules and Regulations and Show Rules of the Miniature Horse Association of Australia Inc and any amendments made thereto. I/we further agree to abide by the code of ethics, decisions, actions and amendments, thereto of the Miniature Horse Association of Australia Inc. By signing this application, I/we understand that I/we am/are personally responsible for the information submitted and also understand that in the event said information is determined to be inaccurate or fraudulent, I/we am/are subject to penalty and/or loss of Membership.

**Application for Permanent Height Card approved by the National Secretary:**

**Name: ..... **Signature:** ..... **Membership No:** .....**

**Date: .....**

**For Office Use Only:** Recorded  Card  Letter  Posted